

Francis Clifton and William Black Eighteenth Century Critical Historians of Medicine

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MEDICAL historians are accustomed to characterize the eighteenth century by formalism, calling it the age of medical systems and theories which made no significant contribution to medical science. This judgment may be partially correct with respect to German medicine but not at all with respect to British medicine whose greatest achievements were not in the realm of theory but in practice. Indeed, even the sober English have not kept entirely free from attempts at hypotheses designed to classify facts and systematize, but they did not give allegiance, or at least they did not give unconditional allegiance, to any of the existent systems, proclaiming aloud the superiority of facts over ideas and despising every theory unless some direct and immediate benefit could be expected to accrue from it.

The importance of the eighteenth century lies mainly in its skeptical and critical or "enlightening" tendency. It laid—so to speak—the axe to the roots of the various departments of cultural thought and science. British criticism of medical science and art started very early with the opposition to dogmatic scholasticism. Roger Bacon's treatise, *De erroribus medicorum*, comprises a criticism of the spirit in which studies were then pursued and an exposition of a new scientific method. It enumerates almost thirty-six defects of medicine. The deficiencies of physic are set down by Francis Bacon in his *Novum organum* and in his *Advancement of learning*. He finds great fault with the discontinuance of that useful Hippocratic method of writing narratives of particular cases with "diligence and exactness containing the nature, cure and event of distempers." Thomas Sydenham, after having read many books and after observing the steps of nature in disease for many years with watchful eyes, lays open his doubts and his ignorance with noble but rare sincerity. He shows that he had little or no confidence in the doctrines of authors and very limited confidence in his own experiences. Sydenham complains of the excess of drugs and advises his brethren to abstain more from prescribing medicines and to trust na-

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ture. Everard Maynwaring (1628–1699), who called himself “doctor in physick and hermetic philosophy,” was in advance of his time in condemning the use of violent purgatives and indiscriminate bloodletting. Gideon Harvey (1640?–1700?) was a copious writer who turned a piercing light on medical customs and persons of his time. He ridiculed sharply certain old-world preparations—theriaca, mithridatica, etc.—traditionally preserved in the *London Pharmacopeia*. One of Gideon Harvey’s works—a collection of random criticism on medical practice—has an ironical title *The art of curing diseases by expectation* (London, 1689). This book acquired some reputation on the continent through the patronage of Georg Ernst Stahl. Richard Mead in his Harveian oration of 1723 compared the status of ancient and modern medicine to the disadvantage of the latter. This declaration provoked, of course, much literary controversy. But the most complete criticism of eighteenth century medicine comes from Francis Clifton and William Black.

Francis Clifton (?–1736) of Great Yarmouth, Norfolk, received an M.D. degree at Leyden in 1724. His inaugural dissertation, *De distinctis et confluentibus variolis*, was included by Haller in his *Disputationes ad morborum historiam et curationem facientes*. Clifton settled in London where his classical and scientific attainments won him the friendship of many eminent men, among others Sir Hans Sloane, at whose instance he was elected a fellow of the Royal Society in 1727. He published in the same year *Hippocratis coi operum quae extant omnium secundum leges artis medicae dispositorum*, followed in 1732 by *Proposals for printing, by subscription, all the works of Hippocrates in Greek and Latin, digested in a new and regular manner*. Clifton also received an honorary degree of M.D. from Cambridge in 1728. In the same year he was admitted to the College of Physicians. In 1732 he read the Gulstonian lecture. He also held the appointment to the Prince of Wales which he resigned in 1734, leaving London abruptly for Jamaica for obscure reasons. Besides the above-mentioned works he published *Tabular observations recommended as the plainest way of practising and improving physick* (London, 1731) and *Hippocrates upon air, water, and situation* (London, 1734).

Clifton, in his work *The state of physick, ancient and modern* (London, 1732, and French translation by Abbé Desfontaines, Paris, 1742) says:

“Having thus gone through what I all along intended, and given a short view of the *State of Physick* from the earliest Ages of the *Greeks* to the times we now live in, (by which the reader is convinc’d, I hope, of the insignificance of *Hypotheses*, and the importance of *Observation*). I come now to propose the *plan for improving Physick*,

and making it more useful in our days, than ever it was before. This, I apprehend, may be brought about "by Physicians rejecting every thing that is doubtful or perplex'd, and cultivating the business of *Observation* in the best manner it is capable of." By this means we shall come (if ever we can come) to the true knowledge of diseases, and the readiest method of curing 'em, especially as the *Materia Medica* is so vastly improv'd to what it was among the *Ancients*. Whereas, while we are ignorant of the true state of diseases, or at least not sufficiently acquainted with their *natural appearances, periods* and *terminations*, is it to be wonder'd at, that mistakes shou'd often happen, both in the *explanations* that are attempted by some, and the *remedies* that are administer'd by others.

" . . . If the *Observations of the Ancients* are of no use in *England*, let us carefully avoid what they have told us, and industriously enquire how the case really stands *here*; in order to know the days that are *critical* with us, as well as they cou'd those that were *critical* with them. The knowledge of these things wou'd be of admirable use, and make the practice of Physick much easier, and more successful than ever: for this can never be had, but by a diligent observation of the course of diseases, and the effect of medicine; so that we shou'd plainly see what is done by *Nature*, and what by *Art*, and consequently be able to distinguish with more exactness, and prescribe with more honour to ourselves and more advantage to the patient.

"Add to this, that when we have got a number of *facts* together, sufficient to ground a good system upon, the *Philosophy* and *Anatomy* of the present times may help us abundantly more than we can now expect: but till this be done, the less we refine and *philosophize* in physick, the better it will be for the Patient, whatever it may be for the Physician. . . .

"Add to this, that the *philosophy* then in fashion was of a different stamp from that of the *Ancients*, and much more to be depended on, as it was the result of plain and evident experiments, and not the *chimæra's* of an inventive head: . . . The minds of physicians have . . . been almost intirely employd ever since with *Diagrams* and *Theories*, and a thousand things of that kind . . . to the neglect of other matters really important. The *body* has been survey'd inch by inch, and the suppos'd force of every fibre computed with a shew of surprising exactness. The fluids have been examin'd by all the ways that cou'd be thought of; . . . In a word, the *speculative* part of physick has been vastly improv'd within a *century*, . . . and by the sagacity and industry of the *moderns*, we have in many respects the advantage of the *ancients*, especially in *Anatomy*; so far at least, as the knowledge of the *situation*, the *structure*, and the *use of the parts*, is a real advantage in physic. . . . But yet the business is far from done. Diseases are known much less than might reasonably be expected . . . we have *Theories* in abundance, and treatises without number. . . . Almost every physician has had a system of his own, with a mixture of more or less of his own country's philosophy in it: and this seems to be the reason, why so many unaccountable things have been said and unsaid by physicians of every nation in Europe." . . .

"As to the writers of *observations* (which are very few, in comparison) they, for the most part have trusted to their memories for almost all the cases they have left us: a very fallacious way of instructing, and by no means proper for a physician. Baglivi . . . was so sensible of this, and of the tendency of the course physicians were then in, that he wrote a treatise on purpose to shew the usefulness and necessity of *regular and judicious observations*, preferable to any thing else in Physick, and has laid down a great many ingenious rules for that purpose, both for private persons and public societies. But I'm afraid the method he prescribes will never be made use of. . . .

Even Baglivi himself . . . has given us a more imperfect account of some things then might have been expected, even from a plan less perfect."

"Hippocrates is by far the best example."

"*Arts and Sciences* are not to be improv'd but by judicious experiments and fair conclusions. . . . This doctrine was soon after confirm'd by the great discovery of the *Circulation*, a discovery, that let in more light upon the *animal economy* in a day, than whole Ages were capable of before. All the disputes about *bleeding* . . . and in short all the *Theories* of the *Ancients* were destroy'd in a manner at once, by this single discovery. . . . [The *Medicina Statica Sanctorii* was another notable discovery. In the small but excellent book of Santorio] the doctrine of *perspiration*, sensible and insensible, the effects of different *airs* and *waters*, *meats* and *drinks*, *sleep* and *watching*, *exercise* and *rest*, *venery* and the *passions*, are all so ingeniously consider'd here, and that not from any *Theory*, or philosophical speculation, but from regular and judicious experiments, made . . . by weight and measure. . . ."

"No wonder then that the physicians of those days shou'd have entertain'd hopes of seeing their Art in a state of perfection. . . . *Anatomy* was vastly improv'd, *Chymistry* much enlarg'd, and in great esteem. *Experiments* frequent and judicious. . . ."

"I wou'd not be understood, as I meant, that a physician shou'd turn his back upon the discoveries of the *moderns*. Far from it. He, who is a stranger to these discoveries, will make but a poor figure in physick, and so will he, who looks upon 'em as the main things. . . . And so the study of *natural philosophy*, tho' it cann't make a man a physician, will however make him a better physician. . . . But then it is equally true, that *regular and judicious observations* have done more good in Physick than all the *Theories*, and all the *discoveries*, that have 'ever been yet found out. What may be done hereafter by these discoveries is another question; the foundation having been laid but lately, and nobody has built upon it to signify, except . . . Herman Boerhaave. He indeed has wisely applied these noble discoveries; and from a variety of *chymical*, *mechanical* and *anatomical* experiments, and a compleat knowledge of the *Ancients*, has form'd the *concisest and best System*. . . ."

In order to procure a valuable collection of observations, Clifton proposes first of all that "three or four persons of proper qualifications shou'd be employ'd in the *Hospitals* . . . to set down the cases of the Patients there from day to day, *candidly* and *judiciously*, without any regard to private opinions or publick systems, and at the year's end publish these facts just as they are, leaving every one to make the best use of 'em he can for himself."

. . . If this plan be follow'd, the consequence will be, that Diseases will be better known, and easier cur'd, even supposing the *Materia Medica* should stand as it does. But if that also shou'd be reform'd, and put upon its proper foot, . . . everything wou'd then be done, that the *Art* is capable of, or that mankind in general can hope for: . . . The event wou'd answer our utmost wishes.

Equally constructive criticism of the state of medical affairs at this time is found in the works of William Black (1749-1829). He was born in Ireland and graduated M.D. at Leyden. In 1787 he was licensed by the College of Physicians of London. After living in Piccadilly for many years,

where he had a flourishing practice, he retired to Hammersmith where he died. Black is remembered chiefly as a statistician. He published *Observations on the small-pox and inoculations, and the decrease of mankind at every age with a comparative view of the diseases most fatal to London* (London, 1781). To the second edition of this work he added a postscript "containing an easy plan for new modelling and essentially improving the London bills of birth and mortality" (London, 1781). He also published *An historical sketch of medicine and surgery from their origin to the present time, and of the principal authors' discoveries, improvements, and errors* (London, 1782; a German translation was published by Scherf in 1789 and a French translation by Coray in 1798). A third work of importance published by him is *Comparative views of the mortality of the human species at all ages, and of the diseases and casualties by which they are destroyed or annoyed* (London, 1788).

Comparing the ancients with the moderns Black writes as follows:

"In understanding the pathology of diseases, whether from external or internal causes, we are greatly superior to our old masters. That knowledge acquired by bills of mortality is peculiar to the moderns. Obstetrics and surgery amongst the moderns have likewise made very considerable progress towards perfection. In the care of several acute and chronic diseases we can claim little, if any, superiority above the ancients."

"In the 'Methodus Medendi,' we have not made those rapid strides by modern discoveries in anatomy and physiology, chemistry, botany, etc., which might at first be supposed, and, naturally, expected. For instance, convulsions, asthma, apoplexy, palsy, epilepsy, madness, scrophula, dropsy, internal aneurysm, cancer, gangrene, and mortification still remain as difficult to cure, notwithstanding the structure and physiology of the brain, nerves, lungs, glands, blood vessels, circulation and perspiration are so well understood, and the component parts of the human fluids and solids so minutely scrutinized by chemistry."

"I have not the most distant intention to depreciate the basis of medical studies. All that I mean to insinuate is that physicians should not be totally absorbed in any one subordinate branch of medicine, whether anatomy, chymistry, physick, botany, or any other, as if by that means alone they could cure diseases. The attention of the moderns hitherto has been principally ingrossed by these preliminary branches and by theory, whereas they merely constitute the alphabet of medicine. In previously acquiring at schools the dead languages of Greek and Latin with some modern languages and other necessary sciences and polite accomplishments, and afterwards, at universities, the introductory rudiments of the different branches of medicine, nearly one third of life is spent. After this period, and gleaning all the practical knowledge contained in books, medical men should attend to the active and useful part of the profession, to the discovery of remedies and the diminution of mortality, and to settle facts in their progress. It is greatly to be regretted that not one physician in a thousand makes a single discovery nor adds an iota of information to the medical fund, but jogs on in the beaten routines and repeties, and like the bulk of academic doctors barely keeps alive what is already known. New facts, and original observations of utility are very thinly scattered, even in authors of great renown."

"Physicians should not despair of greatly extending the sublime part of the medical science, the diminution of mortality. Our grave meditations and medical knowledge are of little signification to mankind, if we do not acquire the means of healing and preserving lives. Ingenious theories are of no use to sick and diseased persons. The professors of medicine should not be distinguished by the subtilty of their philosophical speculations, but by their public utility."

"Many chronic diseases, I know, are not to be removed in a few days, weeks, or even months. Fresh and temperate air, different diets and exercises, medicated mineral waters, baths and agreeable amusements are all powerful remedies. I am persuaded that in many diseases drugs either unskillfully administered, or out of season, do more harm than good."

"I believe that medical and even surgical knowledge in the cure of corporeal infirmities, and in the prevention of mortality, is very far remote from perfection."

The basic thoughts of Clifton and of Black are as true today as they were in their times in spite of the unbelievably great advance of knowledge and science in our age. But however much we may agree with Clifton's and Black's considerations, we also understand that they could scarcely influence their contemporaries. It has been proven by P. G. Cabanis' work *Du degré de certitude de la médecine* and by Johann Georg Zimmermann's book *Von der Erfahrung in der Arzneikunst* that eighteenth century medicine was not capable of any higher level of certainty. Medicine could not attain the desired certainty because of the lack of a pathological-anatomical and bacteriological basis for the conception of disease, the lack of physical diagnostics, and of experimental and statistical means for a sound evaluation of drugs and therapeutical methods. This aim was not reached before the first half of the nineteenth century. We have to admire Clifton and Black for the honesty of their critical thoughts and we have to pay them due respect in spite of their ultimate failure to change the medical conception of an age that was not ready for their ideas.

